0	1/18/2005 110-32	FAX 650 808 60	78	THERAV	ANCE PATENT		Ø 002
•	PART B - FEE(S) TRANSMITTAL						
01/19/200 01 FC:150	JAN 1 8 2005 Complete and send this John, together with applicable			• •		7 <b>77 77</b> 7	(
				(.,, 2	Commissioner for P.O. Box 1450		
	TRADENAR		or <u>Fax</u>		çinia 22313-1450		
	INSTRUCTIONS: This form should be used for transmitting the ISSU appropriate. All further correspondence including the Patent, advance or indicated unless corrected below or directed otherwise in Block l, by (a)					ired). Blocks 1 through 5 sh vill be mailed to the current	ould be completed when
	mannenance nee normeanous.						
		57 ADDRESS (Note: Use Block 1 for	rany change of address)		Note: A certificate of Fee(s) Transmittal. The papers. Each addition have its own certificate	mailing can only be used fo is certificate cannot be used fo al paper, such as an assignment of mailing or transmission.	r domestic mailings of the or any other accompanying at or formal drawing, mu
	THERAVANCE, INC.				Co	etificate of Malling on Trans	
	901 GATEWAY B SOUTH SAN FRA	OULEVARD NCISCO, CA 94080			I hereby certify that the States Postal Service addressed to the Mai	his Fec(s) Transmittal is being with sufficient postage for firs I Stop ISSUE FEE address TO (703) 746-4000, on the di	deposited with the Unite t class mail in an envelor above, or being facsimi
	)5 DEMMANU2 00000045	5 500344 10669778					te indicated below. (Depositor's name
					Baibai	Barbara Bryant	
2 FC:150 3 FC:800					January /	8. 2005	(Date
	APPLICATION NO. FILING DATE			FIRST NAMEI	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
<u>.</u>	10/669,778 09/24/2003			Michael R.	Leadbetter	P-088-US3	4362
	APPLN, TYPE	SMALL ENTITY	ISSUE F	EB	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	YES	XXX	\$1400	\$300	X5X5X\$1700	03/08/2005
	EXAMINER		ART UN	IT	CLASS-SUBCLASS		
	RUSSEL, JEFFREY E		1654		435-006000	•	-
	1. Change of correspondence address or indication of "Fee Address" CFR 1.363).			(1) the nat	ting on the patent front page, limes of up to 3 registered pater	. Toff+or	A. Hagenah
	Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,  (2) the name of a single firm (having as a member a			
	"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered 2 registere listed, no r	attorney or agent) and the nam d patent attorneys or agents. If name will be printed.	no name is 3	
	ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document hat recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						***
	Theravance,	Inc.		South	San Francisco, (	California USA	
	Please check the appropriate assignee category or categories (will not be printed on the patent): 🖸 Individual 🕱 Corporation or other private group e						ap chitity 🗖 Governmen
	4a. The following fee(s) are enclosed:  4b. Paym  ☐ issue Fee				• •	al a sail	
	Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.			
	Advance Order - # of Copies 10			The Director is hereby authorized by charge the required fee(s), or credit and Deposit Account Number 50-0344 (enclose an extra copy of the			redit any overpayment, to py of this form).
		(from status indicated above					+

U a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agont; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Date January 18, 2005
Typed or printed name Jeffrey A. Hagenal Ph. D. Registration No. 35, 175

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including galbering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 11/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE